

rhinogenic origin is recognized as a separate clinical entity, and "in case of suspicion of disease of the accessory sinuses, immediate operation is indicated."

A short, but good chapter on The Orbit is by Peters. Hertel wrote on Injuries, War Injuries, Sympathetic Ophthalmia, and Compensation and his chapter is well illustrated. He gave the percentage of eye injuries in the World War as between 5 and 10% as compared to 0.86% in the war of 1870. The Sweet method of localization of foreign bodies does not receive the attention to which it is entitled and, according to our concepts, too much reliance is placed upon the sideroscope. The effects of war gas and the therapy indicated are gone into at length, a radical innovation in ophthalmic textbooks. The text is completed by a compilation of the Eye Conditions secondary to General Systemic Disease by Heine. The twelve illustrations of the fundus by Oeller are excellent.

On the whole, this is one of the best Ophthalmic Textbooks that has appeared. The printing and the illustrations are excellent and there are evidences of careful proof reading. No separate chapter is devoted to anatomy or pathology, but each chapter opens with a short anatomic description. The pathology is inserted as it occurs and is comprehensively illustrated.

Harry Gradle.

Defective Ocular Movements and Their Diagnosis. E. and M. Landolt.

Paris. Translated by A. Roemmele and E. W. Brewerton, London. 100 pages, 27 illustrations. London, The Oxford Press.

This book has been published for some years, but it should be better known to English reading ophthalmologists. As the authors state in their preface: "We have not attempted to write a hand book but merely a handy book, a guide to aid the student and practitioner in finding his way over the oculomotor system, a path on which it is so easy to go astray."

The matter is arranged under: Anat-

omy and Physiology, Disturbances of the Movements of the Eye, Paralytic Strabismus, Strabismus Resulting from a Lesion of the Centres Governing the Symmetrical or Associated Movements of the Eyes, and Affections of the Ocular Mobility Following a Lesion of the Centres of the Equilibrium of the Body and Eyes (Paradoxical Affections). These titles have evidently been chosen after careful consideration and are worthy of thought.

They reflect a view of the disorders of the ocular movements very different from that set forth in most text books, or expressed in the usual paper, reporting the results of operations on the eye muscles; one that is more in accord with the sound views of physiology and conducive to the safer treatment of patients. The difference between an operator and a surgeon is nowhere more frequently illustrated than in the field of "operations on eye muscles;" and no class of cases more needs management with a broad view of the issues involved than these cases of defective ocular movement.

To get his early impressions of this field of practice from a book of such safe and sane view point, and minute consideration of methods of diagnosis, is a piece of rare good fortune for the young ophthalmologist. He should make himself thoroughly familiar with every part of it. Its brevity and condensation make it a book to be studied, digested, and applied in the study of cases and also in the study of other literature relating to the same. When one has mastered and used the book in this way, the fact that it has a rather imperfect index will be of small importance.

E. J.

Squint: Its Causes, Pathology and Treatment. By Claud Worth, F.R.C.S. (Fifth Edition).

The writer has given commendatory reviews of the four previous editions of this work, and this is no exception. Worth's opinions as to the causation and cure of squint, be it apparent or

latent, i. e., a heterotropia or a heterophoria, have gradually been accepted by the profession, so that there now are but few neglected cases, or those inappropriately or insufficiently treated, where the oculist has had the opportunity to apply his skill.

The erroneous idea formerly current, that a child "may grow out of the squint," is passing into oblivion. Worth shows that true squint is due to want of, or imperfect development of the fusion faculty, preventing the development of binocular vision; and is not in its beginning due to faulty insertion of the tendons, of the recti muscles or a paresis of the muscles. Heterophoria, however, is usually due to misplacement of these insertions. Moderate degrees of heterophoria are compensated for by the fusion faculty. High degrees of this latent squint need operation. A large proportion of cross-eyed children who are brought to the surgeon within the limits of time for the development of the fusion faculty, have this deformity corrected by glasses and development of this faculty secured by exercise of the fusion centers.

As regards operation, naturally Worth adheres to his own. He has practically, as have most of us, given up the operation of tenotomy, and advances the muscles. The reviewer has done this operation many times, but prefers an advancement and shortening operation which does not leave the resultant scar, and where there is no danger of going through the sclerotic, such as in that of Lancaster.

We hope to see in the next edition the assertion that "partial and repeated tenotomies are commonly done in America" expunged, for this method of treatment is certainly not in common use and is condemned by nearly all our surgeons. Previous editions of this work have doubtless been read by all those now in practice. The amendments and new subject matter included in this last edition render its possession valuable.

H. V. W.

Be Beautiful in Glasses. Frank G. Murphy, M.D. Mason City, Iowa. 16 pages, illustrated.

This pamphlet, in which more than half the pages are occupied with illustrations, is out of the lines of literature usually addressed to the ophthalmologist. Its author says that twenty-five years in active practice as an oculist have convinced him that there is a demand for such a treatise. When we consider how many patients have failed to receive the benefit that glasses would give because they think wearing glasses would make them "look horrid," it can readily be understood that the subject has practical importance.

The illustrations are diagrammatic, too much so to be always convincing; but they help to set forth ideas regarding the selection of frames that should be more generally considered. The work attempts to utilize certain principles regarding optical illusions that should be availed of to add to the pleasant impression of the face, rather than suffered to detract from it.

E. J.

CORRESPONDENCE. IMPRESSIONS OF VIENNA CLINICS

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On the surface, Vienna shows but little alteration from what it was seven years ago, and apparently offers all its former charm and attraction. A little closer observation, however, reveals that life there is different now. The people are more shabbily dressed. To conserve light, cafes and theatres close at about ten o'clock at night. There are very few automobiles in evidence. The gaudily dressed officer or soldier of former days is conspicuous by his absence. These are the outward symptoms of a people in distress. Nevertheless, Vienna is crowded and the hotels are filled with foreigners from